

PATENT COOPERATION TREATY

From the RECEIVING OFFICE

To:

ST JUDE CHILDREN'S RESEARCH HOSPITAL
OFFICE OF TECHNOLOGY LICENSING
332 N. LAUDERDALE ST
MAILSTOP 0742
MEMPHIS, TENNESSEE 38105

PCT

NOTIFICATION CONCERNING PAYMENT OF PRESCRIBED FEES

(PCT Rules 14, 15 and 16 and Administrative
Instructions, Sections 102bis(c), 304(a) and (b),
323(b), 707(b) and 803)

Date of mailing
(day/month/year) **05 SEP 2003**

Applicant's or agent's file reference
SJ-02-0011PC

PAYMENT DUE
see item 3 for time limits

International application No.
PCT/US03/23584

International filing date/Date of receipt
(day/month/year) **28 Jul 2003**

Priority date (day/month/year)
09 Aug 2002

Applicant
ST JUDE CHILDREN'S RESEARCH HOSPITAL

1. The applicant is hereby notified that this receiving Office has received:

- ☒ the payment of all the prescribed fees, and ☐ an overpayment, which will be refunded in due course.
- ☐ no or insufficient payment of the prescribed fees and the applicant is hereby invited to pay the balance due, as summarized under item 2, within the time limit(s) indicated under item 3.

2. Fees and payment calculation:

1,404.00	-	1,404.00	=	0.00
Total fees payable		Amount paid		Balance

- ☐ The details of the calculation are given in the Annex.

3. Time limit(s) for payment and amount(s) payable (Rules 14.1, 15.4 and 16.1(f)):

- ☐ within ONE MONTH from the date of receipt of the international application (for the transmittal fee (if any), the search fee, the basic fee and the designation fee). The amount payable for each fee is the amount applicable on the date of receipt of the international application.
- ☐ within ONE YEAR from the priority date (only for the designation fee and only if this time limit expires later than the above time limit).
— If the designation fee is paid within one month from the date of receipt of the international application, the amount payable is the amount applicable on that date of receipt.
— If the designation fee is paid within one year from the priority date but later than one month from the date of receipt of the international application, the amount payable is the amount applicable on the date of payment. The receiving Office should be consulted for the applicable amount.
- ☐ within 16 MONTHS from the priority date (only for the fee for priority document). The applicant's attention is drawn to the fact that the request made by the applicant under Rule 17.1(b) will be considered not to have been made unless the fee is paid within that time limit.

4. Additional observations (if necessary):

- ☐ The search copy will not be transmitted to the International Searching Authority until the search fee is paid (therefore the start of the international search will be delayed) (Rule 23.1(a) and (b)).

Name and mailing address of the receiving Office
Mail Stop PCT, Commissioner for Patents
P.O. Box 1450, Alexandria, VA 22313-1450

Facsimile No. 703-305-3230

Authorized officer

Mamie Holmes

Telephone No. 703-305-3664

Form PCT/RO/102 (January 2003)

BEST AVAILABLE COPY

**ANNEX TO FORM PCT/RO/102
CALCULATION OF THE PRESCRIBED FEES**

International application No.
PCT/US03/23584

T Transmittal Fee

Prescribed amount: 240.00 **T**
 Amount paid: 240.00
 Balance: 0.00

☒ correct amount
☐ overpayment
☐ balance due

S Search Fee

Prescribed amount: 700.00 **S**
 Amount paid: 700.00
 Balance: 0.00

☒ correct amount
☐ overpayment
☐ balance due

I International Fee

B Basic Fee

Fixed amount for first 30 sheets: 328.00 **b1**
 $\frac{1}{\text{Number of sheets in excess of 30}} \times \frac{12.00}{\text{Fee per sheet}} = 12.00$ **b2**

Additional component: . . . 400 x $\frac{0.00}{\text{Fee per sheet}} = 0.00$ **b3**

Prescribed amount (b1 + b2 + b3) = 340.00 **B**

D Designation Fee

Amount of designation fee: 104.00
 Number of designation fees payable (maximum 5): x 1
 Prescribed amount = 104.00 **D**

R Reduction where PCT-EASY software is used or where the international application is filed in electronic form (See the PCT Applicant's Guide, Volume I, General Part, for details on the availability of this reduction):

0 **R**

Sub-total (B+D-R): 444.00 **B+D-R**

Prescribed total amount (The amount to be entered at I is the sub-total entered at (B+D-R), except where the applicant is (or all applicants are) entitled to a reduction of 75%, in which case the amount to be entered at I is 25% of the sub-total (B+D-R); certain applicants from certain States are entitled to a reduction of 75% of the international fee; see Notes to the Fee Calculation Sheet as annexed to the Request Form, PCT/RO/101, for details):

444.00 **I**

Amount paid: 444.00
 Balance: 0.00

☒ correct amount
☐ overpayment
☐ balance due

P Fee for priority document

Prescribed amount: 20.00 **P**
 Amount paid: 20.00
 Balance: 0.00

☒ correct amount
☐ overpayment
☐ balance due

Additional observations (if necessary):

- ☐ The amount paid for the designation fee covers the following designations: _____
☐ Other (specify): _____